



**Women's Council of Realtors® – Gwinnett Chapter
Application for Membership**

Date: _____ Name: _____

Company Name: _____

Company Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

Residence Address: _____

City/State/Zip: _____

Cell: _____ Fax: _____

I would like my mail sent to: My Business My Residence

Email Address: _____

Birthday: (month and day only): _____

Name of Your Board of Realtors: _____

What Type of Membership Held: Realtor® Realtor®-Associate Affiliate

If National Affiliate, is your board membership: Under Your Own Name Under Your Company Name

Note: One of the above MUST be checked to become a National Affiliate WCR Member.

What year did you become active in real estate? _____ N/A

Please list any professional real estate designations you hold: _____

Have you been a National WCR member in the past 12 months? Yes No

If yes, what was your local chapter? _____

Realtor® Member Dues	
National Dues:	\$111.00
State Dues:	\$25.00
Local Dues:	\$10.00
Total Dues:	\$146.00
<input type="checkbox"/> Renewal <input type="checkbox"/> New Member	
Payment by Check	
Make your check payable to Women's Council of Realtors® Gwinnett and mail with this application to:	
Mary Jane McDaniel, VP of Membership Gwinnett WCR c/o NAMAR 2145 Duluth Hwy. Duluth, GA 300977	
For More Information Call or Email Mary Jane @ 770-945-9474 maryjanemcdaniel@gmail.com	

Affiliate Member Dues	
<input type="checkbox"/> Local Affiliate:	\$ 95.00
<input type="checkbox"/> National Affiliate:	\$146.00
<i>(must be a member of a local Board of Realtors®)</i>	
Payment by Credit Card	
Fax Application with below information to eFax: 678-730-0199	
<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard	
Credit Card #:	_____
CVC #:	_____ <i>(3 or 4 digit code on back or front of card)</i>
Exp. Date:	_____
Signature:	_____